

VIP/DMORT Program Fingerprinting

Incident	
PM Case #	
Date of Exam	

Body #		
Examiner 1		
Examiner 2		
Condition of Hand	ds	
(Burned, mutilated, etc)		
Fingers Printed		
(List Fingers Printed)		
If not printed why?		
Fingerprint Exam Notes		
Footprint availal	No Footprint Location	